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## UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION II

DATE:

JUN 6 2000

SUBJECT: Inspection of Marino Polishing & Plating, Inc. (EPA I.D. NYN008008005)

FROM: Jim Sullivan, Environmental Engineer

RCRA Compliance Branch

TO: Jo

Joel Golumbek, Chief RCRA Compliance Branch

On April 11, 2000, I conducted an inspection of the Marino Polishing & Plating, Inc. facility located at 244-254 59<sup>th</sup> Street in Brooklyn, New York. Representing Marino Polishing & Plating, Inc was Gerald Marino, the company's President.

Marino is a contract bright nickel and chrome plater. The bulk of the items plated by Marino are brass and steel plumbing supplies. The current configuration of the automatic plating line is as follows: soap wash - cold water rinse - electrocleaner - cold water rinse - activator - 2 cold water rinses - electrocleaner - 2 cold water rinses - sulfuric acid dip - cold water rinse - nickel plating tank - 3 cold water rinses - chromic acid tank - 4 cold water rinses - the parts are placed on racks and placed in a drying oven.

The company treats wastewater associated with the plating operation prior to releasing it to the POTW via a permitted discharge. The treatment consists of cyanide destruction by the addition of sodium hypochlorite and chrome reduction by the addition of sodium metabisufite. The only solid waste is a filter which is used to capture nickel. This filter is changed once every four months and carted off-site with general plant trash.

Marino Polishing & Plating, Inc. is currently not a generator of hazardous waste.

### **INSPECTOR'S MULTI-MEDIA SCREENING CHECKLIST**

Facility Name:

| Address: | Addr

#### seed to provide an initial response within 5 weeks of the referral.

#### **GENERAL GUIDANCE**

#### VISUAL CUES OF POSSIBLE NON-COMPLIANCE WARRANTING INQUIRY

• Sloppy housekeeping or poor maintenance in work and storage areas or laboratories.

• Stains or discoloration of soil, concrete, or floors in work areas.

Distressed vegetation - unhealthy, discolored, or dead.
Dark smoke or dust clouds, or smoke coming from other than a smoke stack.

• Unusual odors or strong chemical smells.

Sheen on surface waters.

#### **CHECK IT OUT!**

o ... if you see or hear something suspicious during an inspection. Ask probing questions:

- What is it? Is it a waste product?

- What process produced it?

- Has it been tested?

- Where do you normally dispose of it?Do you have a permit for the disposal?
- How long has the circumstance existed?

- When did it begin?

o Pay attention to the situation, and take photographs.

- Note the location and the amount of pollutant that appears to be involved.

- Take notes describing the situation, the source of the pollutant and its emission point.

#### REPORTING POSSIBLE NON-COMPLIANCE

Throughout this checklist, there are YES/NO questions to be circled. If you circle a field marked with an asterisk (\*), you should promptly refer the matter to the Region II office for that program. After you return from your inspection, immediately let your supervisor know that you observed possible non-compliance in another program area during your inspection. The information should then be referred to the appropriate contact listed on page 2.

N.B.: YES or NO options that are in **BOLD** lead to follow-up questions.

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CEPD/ESB: EMB:	Carlos O'Neill 787-729-6951(x230) Victor Trinidad x226	-
EPCRA Toxic Release Inventory:	Dan Kraft 732-321-6669 Nora Lopez 732-906-6890	4
- All other EPCRA:	John Higgins -6194	4
Federal Facilities:	John Gorman 212-637-4008 Jeanette Dadusc -3492	- '
FIFRA:	Adrian Enache 732-321-6769	5
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SPCC/FRP:	Doug Kodama 732-906-6905	9
TSCA: PCBs Chemicals	Dan Kraft       732-321-6669         Dave Greenlaw       732-906-6817         Mike Bious       732-906-6892	10
UST:	John Kushwara 212-637-4232	11
Wetlands:	Daniel Montella 3801	11
Criminal Investigations Division -	William V. Lometti 3634	11

#### <u>Air</u>

•	With the sun in a 140° arc <u>BEHIND</u> you, is opaque smoke is being emitted?	YES* (NO)
	Note: "Opaque smoke" is <u>not steam</u> will obscure anything behind it for >5 minutes. Steam dissipates at a given point; smoke trails off.  Note relative positions of the sun, the observer and the emission point.	esta A algori
	If YES:	
	Note color of smoke:	
	From which specific process line is smoke coming? (e.g., "Boiler No. 4" or "Coating Line C").	
	- What is the cause of the smoke emission? e.g., -	หรือสู่เปล่า
	i. Is air pollution control equipment out of service, or turned off during production?  If YES: When will it be back on line?	YES NO
	ii. Is the facility under an unusual load, using different fuels, or process feeds?	YES NO
	Have any processes been added or changed in any way in the last 2 years?	YES NO
	If YES: Did the facility obtain state or federal air pollution permits for it?	YES NO*
OM	Has the facility undergone any renovation or demolition during the last 18 months, involving removal or disturbance of asbestos-containing materials?	YES NO
	Approximate square or linear feet of materials involved?	
	If >260 linear feet, or 160 square feet, <b>REFER</b> to Air Compliance Branch; and <b>Ask:</b> was EPA notified of removal?	YES NO*
•	Do facility employees maintain, service, repair, or dispose of air conditioning/refrigeration equipment involving CFC refrigerant?	YES NO
	If YES: Does facility have Recovery/Recycle or Recovery only equipment?	YES NO*

assertions substance by excess of the Successful saturable amonthly assume 1 lb.)?

# Emergency Planning and Community Right-to-know Act (EPCRA) EPCRA Hotline Information: 800-535-0202

Toxic	Release Inventory (TRI) For manufacturing facilities, ask 1-2:	
1.	Does the facility have 10 or more full-time employees?	YES NO
_	If "NO", skip to All Other EPCRA.	1
2.	Is the facility classified under SIC codes 20-39?	YÉS NO
If the a	answers to both Questions 1. and 2. are YES, ask:	
3a. Die	d the facility use >10,000 lb. of a chemical during any of the past 5 calendar years?	YES NO
h D	If a. is YES, ask: id the facility file a §313 Toxic Chemical Release Inventory Form R for the chemical?	ALEG MO*
<b>0.</b> D.	20 Stock of Market Market	YES NO*
If the	answer to Q1 is YES, but the answer to Q2 is NO, continue with Q4.	
4. Is t	he facility classified under any of the following sectors (SIC codes outside 20-39)?	
YES	NO Type of facility YES NO Type of facility	
·	commercial hazardous waste treatment petroleum bulk terminals	
	commercial hazardous waste treatment petroleum bulk terminals chemical wholesale coal mining solvent recovery services	•
	coal mining solvent recovery services.	
		A
5. Did	the facility use >10,000 lb. of a chemical during 1998 or later calendar years?	YES NO
IN.D.:	Use" includes treatment, stabilization or disposal of a waste received from off-site for waste proce	ssing.
If Q5 is	s answered YES before July 1999, refer to compliance assistance at 732-321-6759.	
afte	er July 1999, ask:	
Did the	e facility file a §313 Toxic Chemical Release Inventory Form R for the chemical?	YES NO
All O	ther EPCRA:	
•	Is there on-site any of the 360 "Extremely Hazardous Substances" in excess of established	
	threshold planning quantities (which vary by chemical, and range from 1 to 5000 lb.)?	YES NO
	If YES: Were the State Emergency Response Commission (SERC) and Local Emergency	110
	Planning Committee (LEPC) notified of these chemicals for local planning purposes?	YES NO*
	, , , , , , , , , , , , , , , , , , ,	125 110
•	Has the facility had a release of an Extremely Hazardous Substance or a CERCLA	
	hazardous substance in excess of the Superfund reportable quantity (assume 1 lb.)?	YES* NO
	If YES: Was notification of the release provided?	YES NO*
	If YES: i. To whom was the notification given?	_
	ii. Was notification oral or written?	
	iii. If oral, was a written, follow-up report submitted?	YES NO*
	[If the facility does not know the answers to any of i, ii, or iii questions, *REFER*.]	
•	Does the facility have on site Material Safety Data Sheets (MSDS) for all hazardous	
	chemicals used, as required under OSHA's Hazard Communication Standard?	VES NO*
		110
•	If the facility has >10,000 lb of any hazardous chemicals, or Extremely Hazardous Substances	YES NO*
	>threshold planning quantities, have MSDS (or a list of MSDS), and chemical inventory forms	1011
	been given to state and local emergency planning authorities and the local fire department?	YES NO*

Federal Insecticide, Fungicide and Rodenticide Act (FIFRA)

N.B.: If you answer NO to the 1st question in any of the following 4 sections, skip that section & go to the next section.

1.	If inspecting a manufacturing facility, ask:		
A	A. Are any pesticides manufactured, relabeled, or repackaged at this establishment?  Pesticide is any substance or mixture intended (1) to prevent, destroy, repel, or mitigate any pest, or (2) for use as a plant regulator, defoliant, or desiccant.	YES	NO
В	8. If A. is YES, does the establishment have an EPA Establishment Number? All production, relabeling and/or repackaging must be registered with EPA.)	YES	NO*
C.	. If B. is Yes, enter the Establishment Number: and continue:		
D.	Has the company filed the Annual Pesticide Production Report form?  (due March 2 of each year for the previous calendar year's production.)	YES	NO*
2.	If inspecting a storage-distribution facility or a retail facility, ask:		
Α	. Are any pesticides being held for sale/distribution, or stored at this facility (warehouse)?	YES	NO
В	. If A. is YES, are restricted-use pesticides stored, or held for distribution/sale at this facility?	YES*	NO
C	. Are any containers leaking?	YES*	NO
D	. Are pesticides stored next to acid, caustic and/or oxidizing materials?	YES*	NO
3.	If pesticides may not have been properly used, observe and record any effects such as human adverse reaction(s), dead fish, birds, or wildlife, plant damage, etc, and ask:		
	<ul> <li>A. Have pesticides been applied by an employee or by a pesticide application company?</li> <li>B. If A. is YES, ask for:</li> <li>Date of application,</li> </ul>	YES*	NO
	<ul> <li>Name of pesticide applied,</li> <li>Name of pesticide applicator company, or facility person who made the application,</li> <li>Address and/or phone number of pesticide applicator company (if applicable),</li> <li>Type of health complaints from employee (if applicable),</li> <li>Contact person for follow-up.</li> </ul>		
4.	If inspecting a public housing, educational, or day care facility, farm market, flea market, spa or health facility, beauty parlor, or private housing, are pesticides sold there?	YES*	NO
	A. If 4. is YES, are the pesticides registered for agricultural use (see label)  If you suspect, or are unsure if the pesticides are registered for agricultural use, *Refer*.	YES*	NO
	<ul> <li>B. If A. is YES, ask for:</li> <li>Name and identity (e.g farmers, homeowners, pesticide applicators, etc.) of the buyers,</li> <li>Address and telephone number of the buyers,</li> </ul>		
	<ul> <li>Name(s) of pesticide purchased,</li> <li>EPA Registration Number (EPA Reg. No.) of pesticide(s) purchased.</li> </ul>		
Not	C. Are pesticides sold in unlabeled containers or with hand-written labels.  e: If you suspect, but are unsure, that pesticides are being sold in unlabeled containers, or with	YES*	NO

#### written labels, \*REFER\* this.

#### NPDES, Pretreatment & UIC

1.	Does the facility generate industrial wastes/wastewater (IW), sanitary wastewater (WW) and/or storm water (SW) and dispose of any of it as follows (Circle as applicable):		
a.	To a receiving stream/surface water body (or onto ground near enough to impact one)? IW	ww	SW
b.	To a sanitary sewer system that discharges to a municipal treatment plant (POTW)?	ww	SW
c.	To a storm water sewer system?	ww*	SW
d.	To a subsurface disposal system (septic system, drywell, cesspool, sinkhole)? IW*	ww	SW
e.	Is any of it trucked off site?	WW	SW
f.	Onto ground surface (e.g. spray, discharge pipe, open trench)	ww	SW
Ide	entify the water bodies and/or sewer system:		
2a.	Are there floor drains, sinks (not in bathrooms), or storm water collection structures: - where raw materials, products, wastes or wastewaters are generated, stored or transported &/or - that are possibly receiving wastes due to poor housekeeping, etc.?	YES	NO NO
b.	If yes to a, is there fluid in the drain/structure?	YES	S NO
c.	If yes to a, is there evidence that contaminants entered drain/structure? (e.g., discolored or smelly fluid; stained drain or floor nearby)	YES	S* NO
d.	Ask what types of fluids enter drains/structures:		
e.	Ask where each drain discharges to and indicate in question 1.		*
3a.	Has the facility applied for a permit for each discharge noted in questions 1 and 2?  If permitted, ask for permit numbers	YES	NO*
b.	If you answered yes to question 1a or 1c for storm water, but the facility does not have a storm water discharge permit, ask why (facility may not be subject to stormwater requirements):	1.22	
c.	If you answered question 3b, ask what SIC code(s) describe all the facility's activities <sup>1</sup> :		
4 a b	4/ //	YES	NO NO

<sup>&</sup>lt;sup>1</sup> If the first 2 digits of any facility SIC code are 10-14, 20-45 or 51, or if facility is a landfill/land application site, recycler, hazardous waste TSD, or steam electric power generator, or if there are construction activities covering >5 acres, refer this to the water program (WCB, if the site is in NY or NJ; CEPD's ESB, if in PR or VI).

\* Refer this to water program (to WCB, if the site is in NY or NJ; to CEPD's ESB, if in PR or VI).

#### **Public Water Supply**

1. Observe/Ask: Does the facility have its own potable water supply? YES NO If YES, does the facility provide potable water for 25 or more persons? YES 3. If YES, is the water analyzed for contaminants & results reported to the state?

YES NO\*

\* Refer this to water program (to WCB, if the site is in NY or NJ; to CEPD's EMB, if in PR or VI).

#### Radiation

1. Are radioactive materials used or stored at this facility? 2. If YES, does the facility have a state or federal radiation license for them? YES NO\*

## Resource Conservation & Recovery Act (RCRA)

If t	the facility has a RCRA permit or "interim status" as a treatment, storage or disposal facility (TSDF), NOT answer the rest of the RCRA questions, but enter the facility's EPA ID #:	
Tf :	the facility does not have this ID number, ask:	
1.4	A. Has the facility determined that it generates hazardous waste?	YES NO
	If YES, ask how the determination was made:	IES NO
	If NO, skip Questions 2 to 8 and go to Question 9. If YES, continue:	
F	3. If the facility generates or transports hazardous waste, ask for its EPA ID No.?	
	If the facility cannot produce an ID Number, *REFER*.]	
2.4	A. Are there containers or tanks that hold hazardous waste?  If NO, go to Question # 3. If YES, continue:	YES NO
Ε	3. Are the containers and/or tanks clearly marked with the words "Hazardous Waste," and are they marked with the accumulation start date?	YES NO*
(	C. Do hazardous waste storage tanks have secondary containment (berm, vault, double walls)?	YES NO*
Ι	D. Does the facility store hazardous waste in containers or tanks for >90 days?	YES* NO
3.	Does the facility store, treat or dispose of hazardous waste in lagoons, pits, piles or landfills?	YES* NO
4.	Does the facility treat hazardous waste by incineration, precipitation, neutralization, or other means to change the physical or chemical nature of the waste?	YES* NO
5	Door the facility and the	
٥.	Does the facility accept hazardous waste for treatment, storage or disposal from off-site locations (including off-site facilities owned by the same company)?	YE
		S* NO
6.	Does the facility maintain copies of hazardous waste manifests on-site?	YES NO*
7.	Do hazardous waste storage or treatment units (e.g., containers or tanks) appear to be poorly maintained and may release hazardous waste to the environment?	YES* NO
8.	Do chemicals or wastes appear to have been discharged to the environment through improper handling, leaks, spills, dumping or other discharges?	YES* NO
9.4	L. Does the facility generate non-hazardous process wastes, excl. office paper, cafeteria wastes, etc?  If NO, go to Question # 10.  If YES, continue:	YES NO
Ε	3. Does the facility handle process wastes, such as treatment sludges, ash, solvents, waste oils, spent catalysts, acids or bases?	YES* NO
	If yes, please briefly describe the process(es) that generate these wastes.	
10	Does material handling at the facility appear to make	
the	Does material handling at the facility appear to pose, or actually pose, a significant threat to human healt environment?	h or VES* NO

#### **Spill Prevention, Control & Countermeasure (SPCC)**

1. A. Does the facility store oil, whether petroleum, vegetable or transformer oil?

B. If YES, does the storage capacity exceed: 660 gallons in any one above-ground tank?

YES\* NO

1320 gallons in all above-ground tanks?

YES\* NO

42,000 gallons in underground tank(s)?

YES\* NO

2. If the answer to any part of #1. B. was YES, did the facility show you a copy, or have available a Spill Prevention, Control, and Countermeasure (SPCC) Plan?

3. Did the facility have an oil spill within the last 12 months?

#### Facility Response Plan (FRP)

1. Does the facility have an above-ground oil storage capacity ≥42,000 gallons <u>and</u> conduct operations that include over-water transfers of oil to or from vessels?

2. Does the facility have oil storage capacity ≥one million gallons?

3. Did the facility submit a Facility Response Plan to the EPA?

YES NO\*

YES (NO)

YES\* NO

YES\* NO

YES NO

### **Toxic Substances Control Act (TSCA)**

Polychlorinated Biphenyls (PCBs)  SAFETY WARNING: Stay ten feet from any high voltage conductors.	
SAFETY WARNING: Stay ten feet from any high voltage conductors.	
1. Is there liquid-filled electrical equipment (transformers, capacitors) manufactured before 1980? (Exclude equipment with <3 lb (1 quart) of fluid, but include only utility-owned equipment, if inspecting a utility.)	YES NO
A. If Yes, how many of the above are transformers containing: PCBs >500 ppm?  <500 ppm but ≥50 ppm?  fluid of unknown PCB concentration?	* *
B. If Yes, how many of the above are capacitors?	*
2. Are there hydraulic systems manufactured before 1980 that use/used high temperature fluid?	YES NO
A. If Yes, has each system been tested for PCBs?	YES NO*
B. Do any currently have PCB concentrations ≥50 ppm?	YES* NO
3. Does the facility have any oil-filled heat transfer systems manufactured before 1980?	YES NO
A. If Yes, has each system been tested for PCBs?	YES NO*
B. Do any currently have PCB concentrations >50 ppm?	YES* NO
4. Does the facility have PCB waste stored for disposal?	YES* NO
OBSERVE PCB Items (transformers, capacitors, containers)  • Are any leaking?	YES* NO
Do all (except transformers <500 ppm) have a PCB Mark M <sub>L</sub> ?	YES NO*
<b>OBSERVE PCB Waste:</b> In addition to the PCB Mark $M_L$ , is PCB waste in storage for disposal marked with the <b>date removed from service</b> ?	YES NO*
Is PCB waste currently stored for more than 30 days in any area?  If Yes, does the area have a roof and walls to keep out rain?  a 6"-high impervious containment berm?  a PCB Mark M <sub>L</sub> for the area?  a location not in a 100-year flood plain?	YES NO YES NO* YES NO* YES NO*
General Chemical Regulations: Does the facility manufacture, or import into the United States, any chemicals for which they are the sole manufacturer/importer?	YES NO
If YES, do they know that these chemicals are on the TSCA chemical inventory?	YES NO*

## <u>Underground Storage Tanks (USTs)</u>

Description > 100/ 1 1 1 2 1 2 1/24	12575
Does any UST have >10% volume underground and contain petroleum products or CERCLA hazardous substances?  Do all USTs store fuel oil for on site heating?	YES NO
Do all USTs store fuel oil for on-site heating?  If YES, the facility is exempt. Do not complete the rest of the UST questions.	YES NO
Name the petroleum product or hazardous substance in each UST.	-
Is there evidence of UST leakage/spillage?	YES*(NØ
* Refer facility to the Water Compliance Branch.	
Wetlands	
<ol> <li>A. Are wet areas (marshes, swamps, bogs) on or adjacent to the site?         (A federal wetland need not have standing water or wetland-type vegetation; some wetlands have shrubs and trees.)     </li> </ol>	YES NO
B. Are there any waterbodies or waterways on or adjacent to the site?	YES (NO)
2. If # 1. A <b>OR</b> B is <b>YES</b> , is any clearing, filling, dredging, ditching, construction, etc. being conducted on or over the areas, <b>or</b> is there any evidence that such activities occurred very recently?	YES NO
3. If YES, when was the work undertaken?  Does the facility have any permits for this work?	YE S NO *
4. If YES, what agency(s) issued the permits? <u>e.g.</u> , U.S. Army Corps of Engineers; State environmental agency.  For federal permits, what type of permits are they ( <u>i.e.</u> , nationwide, regional, individual)?	
If facility is unable to provide adequate response to # 4, *REFER*.	
CRIMINAL ACTS	
During the course of this inspection, hasanything been brought to your attention indicating:	
1. That the facility is involved in deliberate acts of dumping or discharging wastes	YES* NO
2 Bad intent or conduct? e.g., falsification of records or efforts to conceal activities?	YES* NO
3. Actual harm to individuals as a result of violations?	YES* NO

4. Other activity or behavior that you believe indicates criminal behavior?



\* Refer to Criminal Investigation Division, if you checked YES.